



Summary of Findings

Health Status and Risk Factors

- Overall, only 1.7% of Utah children were reported to be in “fair” or “poor” health, for an estimate of approximately 11,700 Utah children.
- On average, respondents reported that their children’s physical health was “not good” on 2.3 of the previous 30 days. Poor physical health included illness and injury. Children in the youngest age group (0 to 2 years) had slightly more poor health days (3.2 days) than older children. More poor physical health days were also reported for children with special health care needs (3.8).
- On average, respondents reported that their children’s mental health was “not good” on 1.5 of the 30 days preceding the survey interview. Poor mental health was defined as including, “stress, depression, and problems with emotions.” Children in the oldest age group (12 to 17 years) had slightly more poor mental health days than average (2.2 days). More poor mental health days were also reported for children with special health care needs (4.2).
- “Special Health Care Needs” were identified using a modified version of the Foundation for Accountability (FACCT) Living with Illness questionnaire, October 1999 draft. According to this definition, a child was considered to have special health care needs child if he or she had any of ten conditions (see p. 12) that had lasted or were expected to last for at least 12 months. Overall, 12.6% of children in the survey were reported to have had special health care needs. Special health care needs were more common (or more commonly recognized) as children became older.

Health Insurance Coverage

- Of the children age 0 to 17 in the survey, 6.5% were estimated to be without any type of health care coverage at the time of the survey. And 14.1% were reported to have been without coverage at some time in the previous 12 months.
- The most common reasons for lack of coverage were “could not afford premium,” and “employer offers no insurance” (59% and 35%, respectively). Respondents could choose as many reasons as were relevant; 22% indicated that the child’s good health was one reason he or she lacked coverage.
- Of those who were uninsured at the time of the survey, a majority (53.2%) had lacked coverage for at least one year.
- Younger children were less likely to have health insurance coverage, as were children who were Hispanic (14.6%)
- Children under 200% of poverty made up 75% of uninsured children in the survey. Of those children in households whose incomes were below the poverty level, 21.1% had no health insurance coverage. The percentage without coverage for children in households from 101% to 200% of poverty was 10.4%.
- Children with special health care needs were more likely to have health insurance coverage. Among these children, only 4.1% lacked coverage.

Problems with Access to Care

- 14.3% of parents indicated that they delayed or had problems getting care (medical, dental, mental health, or some other type of care) for their child because they could not afford the services. This response was

more likely among parents of children with special health care needs (21%), those whose children were not covered by health insurance (42.1%), and those living below 200% of poverty.

- For all reasons combined, the following percentages of parents indicated that they delayed or had problems getting each of the following types of care:
 - Medical care (12.1%)
 - Dental care (13.6%)
 - Eye care (1.1%)
 - Mental health care (1.6%)
 - Other care (1.7%)

Medical Home

- Having a usual place for medical care is desirable so that health care providers can get to know a child and his or her medical history and social context. For the children represented in this survey, 6.7% had no usual doctor's office or place for acute (sick) care. Children more likely to be without a usual provider included those without health insurance coverage (19.8%), those who were Hispanic (11.3%), and those in households with incomes below poverty (12.4%).
- 77.7% of parents indicated that they felt their doctor always had a thorough understanding of all the various health care services he or she is receiving.

Satisfaction with Care

- 97.2% of parents indicated they were "satisfied," or "very satisfied" with their ability to get information from their medical provider to make informed health care decisions for their child
- Most parents felt that medical and other staff treated them with respect and courtesy: 86.4% indicated "always" and 10.9% said "usually."
- Almost all parents felt that their doctor always had respect for their customs and beliefs (94%).